

Blackpool Council

8 January 2019

To: Councillors Cox, Elmes, Galley, Hobson, Hunter, Matthews, Mitchell, Roberts and L Taylor

Ms Yvonne Russell, Independent Member

The above members are requested to attend the:

AUDIT COMMITTEE

Thursday, 17 January 2019 at 6.00 pm
in Committee Room A, Town Hall, Blackpool

A G E N D A

1 DECLARATIONS OF INTEREST

Members are asked to declare any interests in the items under consideration and in doing so state:

(1) the type of interest concerned either a

- (a) personal interest
- (b) prejudicial interest
- (c) disclosable pecuniary interest (DPI)

and

(2) the nature of the interest concerned

If any member requires advice on declarations of interests, they are advised to contact the Head of Democratic Governance in advance of the meeting.

2 MINUTES OF THE LAST MEETING HELD ON 8 NOVEMBER 2018 (Pages 1 - 6)

To agree the minutes of the last meeting of the Audit Committee held on 8 November 2018 as a true and correct record.

3 AUDIT FOLLOW-UP: EVENTS RISK MANAGEMENT (Pages 7 - 16)

To consider the actions being implemented to address the audit recommendations relating to events risk management.

4 ANNUAL GOVERNANCE STATEMENT 2017/2018 HALF-YEAR REVIEW (Pages 17 - 30)

To consider progress within the Annual Governance Statement for 2017/2018.

5 COUNCIL SAFEGUARDS AGAINST CYBER RISKS (Pages 31 - 36)

To note the update on how the Council safeguards against cyber risks.

6 STRATEGIC RISK REGISTER - SERVICE FAILURE (Pages 37 - 44)

To consider the controls being implemented to manage the strategic risk relating to service failure.

7 DATE OF NEXT MEETING

To note the date and time of the next meeting of the Committee as 7 March 2019, commencing at 6pm.

Venue information:

First floor meeting room (lift available), accessible toilets (ground floor), no-smoking building.

Other information:

For queries regarding this agenda please contact Chris Williams, Democratic Governance Adviser, Tel: 01253 477153, e-mail: chris.williams@blackpool.gov.uk

Copies of agendas and minutes of Council and committee meetings are available on the Council's website at www.blackpool.gov.uk.

Present:

Councillor Galley (in the Chair)

Councillors

Elmes	Hunter	O'Hara	L Williams
Hobson	Matthews	Roberts	

In Attendance:

Mrs Tracy Greenhalgh, Head of Audit and Risk
Mr Neil Jack, Chief Executive
Mrs Judith Mills, Consultant in Public Health
Mr Nick Rayner, Deloittes LLP
Ms Chloe Shore, Community Engagement and Partnership Manager
Ms Karen Smith, Director of Adult Services
Mr Steve Thompson, Director of Resources
Mr Paul Thomson, Deloittes LLP
Mr Chris Williams, Democratic Governance Adviser

Apologies:

Apologies for absence were received on behalf of Ms Yvonne Russell, Independent Member.

1 DECLARATIONS OF INTEREST

There were no declarations of interest on this occasion.

2 MINUTES OF THE LAST MEETING HELD ON 6 SEPTEMBER 2018

The Committee agreed that the minutes of the meeting held on 6 September 2018 be signed by the Chairman as a true and correct record.

3 STRATEGIC RISK REGISTER: LACK OF RESILIENCE

The Committee considered the progress report on individual risks identified in the Council's Strategic Risk Register.

Sub-Risk: Lack of capacity to deliver Council services.

Mr Neil Jack, Chief Executive described some of the measures designed to mitigate the level of risk. The Committee was informed that two tiers of management had been removed and as a result the Council was being run in a way that brought operational control closer to

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strategic priorities, though this had led to a lack of resilience within the organisation.

With regards to succession planning, it was acknowledged that in the future when senior managers left the organisation, external candidates would have to be considered in some cases to fill the vacant posts. To offset the risk further, partnership working had led to sharing of resources and expertise with the Council's wholly owned companies; Managing Director's like Jane Cole at Blackpool Transport Services possessed a level of expertise and transferrable skills which had helped the wider parent organisation and the other wholly owned companies. More generally, a change in ethos and culture within the organisation had led to improvements in recruitment and retention and the appointment of the Head of Safeguarding /Principal Social Worker were provided as examples of this.

Following a discussion about staff morale, the implementation of a Workforce Strategy, annual Individual Performance Appraisal system and Leadership Survey were noted as measures designed to address this important issue. In response to a question about performance appraisal follow-up work, the Committee was informed that training plans were developed and ongoing issues could therefore be monitored. Assurances were provided about confidentiality in the form of outlining the Council's whistleblowing policy and a renewed focus on visibility and accountability of staff, particularly those in senior management positions.

In relation to social care, the introduction of the Health and Social Care Academy, guaranteed interview scheme and enrolment on entry and development level courses designed to broaden staff skillsets, had already proven to be relatively successful. It was also reported that raising the profile of social care would be especially important in order to recruit and retain the best possible people. The Committee sought clarification on the use of agency staff, specifically within the social care context and questioned how the ethos, standards and values of permanent staff were also instilled in agency staff. In response, Mr Jack emphasised the relatively low numbers of agency staff used currently and members noted that those staff were subject to the same induction as permanent staff and had the same performance management arrangements and level of support afforded them.

Sub-Risk: Over reliance on public sector services.

The Chief Executive described the challenge in deciding how services were delivered, how they could be accessed and how resident's reliance on them could be reduced.

A practical example was discussed, namely the @The Grange (formally the City Learning Centre) in which a number of services had been brought together in a single location in order to build a community spirit and provide convenient access to a number of services whilst encouraging local people to get involved and thereby reduce the strain on the Local Authority. In terms of the design and integration process, the Committee was informed that the use of a robust performance management framework, a commitment to providing value for money and ensuring sustainability and resilience were all key elements. A similar scheme of work in Anchorsholme Park was praised for helping to create a sense of community and increase footfall in the area. Other projects were noted such as one in Revoe Park that involved help from Blackpool Football Club and a separate scheme of improvement works in Mereside. A discussion about the importance of providing services to young people Not in

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Education, Employment or Training (NEET) across Blackpool led to recognition of work undertaken so far that included involvement in friends groups in various parks, litter picking patrols, beach cleaning and involvement with the Lancashire Volunteer Partnership.

The Arc service and Vitaline were used as examples where co-location and/or determinately impacting on the core elements of the services provided. A current move towards a Community Hub model for service delivery within Children's Services was regarded as aspirational and would be monitored closely to see if successes could be mirrored in other areas of the Council.

Following questions about the Resident's Survey, the Committee was advised that it was completed using a two strand approach. A general survey had been supplemented by a smaller sample group survey that targeted specific demographic groups. The questions were generally about Council services and residents experiences of them. A report was requested to analyse the responses received once the survey was complete. Some Members suggested that the Resident's Survey itself was not a mitigation measure and it would be those actions undertaken subsequently that would be used to offset identified risks.

A key issue raised during consideration of the item concerned the comprehensiveness of the Strategic Risk Register. Members requested that more information about individual programmes designed to mitigate risks should be included in the commentary of the register so as to better reflect and reassure the Committee as to the extent of any work undertaken.

Sub-Risk: Lack of individual resilience to work in a changing environment.

It was reported that following analysis of the results of the Council's Leadership Survey, action plans and reports were being developed to address those issues identified. Once measures had been put in place, it was anticipated that improvements to wellbeing, health, resilience, motivation and morale of staff would follow. The Committee was advised that a Staff Survey was in development and would hopefully be sent out in the near future. Mrs Greenhalgh, Head of Audit and Risk, added that the audit plan for the next financial year would include organisational resilience given its importance within the Council.

In response to a question about staff health and wellbeing, specifically about the use of mental health champions which were anecdotally in use within private sector organisations, Mr Jack suggested that the practice was desirable but added that staff already had access to a number of resources that would help those affected individuals to deal with mental health issues. These included the Employee Assistance Programme, Occupational Health team, self-assessment questionnaires and staff trained in relevant interventions. Ms Karen Smith, Director of Adult Services added that she felt practice was already good in this regard and described numerous instances where she had experienced staff informally helping each other to deal with depression and/or anxiety in particular.

Resolved:

That a report on the results of the Council's Resident's Survey be brought to a future meeting once completed.

4 PUBLIC HEALTH INTEGRATION AUDIT FOLLOW-UP

Mrs Judith Mills, Public Health Specialist, reported on progress related to the recommendations outlined in the Public Health Integration audit report issued on 8 May 2017. Mrs Greenhalgh, Head of Audit and Risk, advised that she felt the response so far to the recommendations had been appropriate and had satisfied the desired outcomes.

It was reported that with reference to recommendation one, the Healthy Weight Group continued to meet and implement the updated action plan and the Physical Activity Strategy Group led by another directorate had also met. Following a review of both groups, it had been decided that they should remain separate and suggestions related to the feasibility of merging the groups had been deemed inappropriate given the different focus of each. In terms of encouraging physical activity, Mrs Mills advised that in addition to the Council's in-house measures, other organisations that included the Scouts, Blackpool Football Club and the Boathouse all operated schemes that complimented other projects being run locally, for example in Revoe ward and @The Grange Park Farm. Mrs Mills provided assurance that Public Health was engaged with other services, in particular the Parks' Team and that it wasn't working in isolation.

In answer to a question about collaboration between the Council's Parks and Public Health departments, in addition to some financial support from the latter, Mrs Mills suggested that Public Health had a strategic focus primarily as had been evidenced in the Green and Blue Infrastructure Strategy.

In response to sustainability concerns related to the use of an outside contractor, Groundworks operating @The Grange, Mrs Mills suggested that the Council could not use its own Parks Department as they were not eligible for the funding that was used to finance the project. However, the Committee was reassured that the scheme was collaborative in nature. A wider discussion about joint working led to the consensus that all projects should ultimately take advantage of currently available funding and demonstrate a measurable impact.

5 ANTI-MONEY LAUNDERING POLICY AND PROCEDURE

Mrs Greenhalgh, Head of Audit and Risk, presented the Council's revised Anti-Money Laundering Policy and procedure for approval.

The Committee noted that the document was based on the relevant Government legislation. The Council's policy was primarily risk focused and sought to clarify reporting pathways and provide a local context to the guidance. According to Mrs Greenhalgh, cash services within the Council were the main risk area along with business loans, though reassurances were provided to Members that due diligence policies and straightforward conveyancing procedures would make future reporting more efficient and effective.

Resolved:

To approve the Anti-Money Laundering Policy and Procedure.

6 RISK SERVICES REPORT-QUARTER TWO 2018/2019

Mrs Tracy Greenhalgh, Head of Audit and Risk, presented the Risk Services Quarter Two Report 2018/2019 to provide the Committee with a summary of work completed by Risk Services and to provide management response updates. During the period, audits had been undertaken of various Council systems and processes that included but were not limited to, Adult Services Safeguarding enquiries, School Improvement Board and processes, Business Rates, Early Years financial systems, Improved Better Care Fund and Risk Management. Further information would be published in future quarterly reports to the Committee.

Members were satisfied that all risk registers were currently up to date and in response to a question about the current figure of a 33% completion rate of the 2018/2019 Audit Plan, Mrs Greenhalgh advised that this was an annual figure and not cumulative. Therefore, the team was still on target to achieve a 90% completion rate by the end of the financial year. She added that monthly one to one meetings with staff would be used to monitor progress towards the overall completion rate target.

When asked about the difference between the recovered amounts of money in corporate fraud cases in Blackpool when compared with equivalent figures from Rochdale, it was suggested that such differences did not reflect badly necessarily and perhaps suggested that the lower figure for Blackpool was demonstrative of tighter controls which had mitigated the level of fraud to much lower levels resulting in less money requiring recovery.

In response to questions about the internal audit of the Quality Corridors project, Members were assured that lessons had been learned especially in relation to flaws in the methodology and inadequate governance practices uncovered. Mr Jack, Chief Executive, advised that it was especially important to proactively address issues in real time rather than wait for auditing to uncover weaknesses. A wider discussion about capital projects more generally ensued and further assurances were offered in the form of the use of the Apprenticeship Levy, Capital Projects Team and external companies and consultants where appropriate as mitigation measures. The Committee accepted the practical difficulties in managing numerous large scale projects simultaneously, but expressed a desire that the Council continue to adequately monitor all capital projects and intervene suitably early on if problems arose.

The Committee was informed that following the introduction of the Housing Benefit Risk Based Verification process, the service had not measured the effectiveness of the approach to previous claims and this was partly due to a desire to avoid financial penalties and to focus on staff working accurately.

A more general request for improvements to the overall layout of the performance and summary section of the quarterly reports was noted especially with regard to user-friendliness and clear signposting of outcomes for example whether good, inadequate etc.

Resolved:

That in future, the layout of the performance and summary table section of the quarterly

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report be changed to improve overall user-friendliness and to clearly signpost the ratings for each audit.

7 DATE OF NEXT MEETING

The date and time of the next meeting of the Committee was noted as 17 January 2019 at 6pm in Committee Room A, Town Hall, Blackpool.

Chairman

(The meeting ended at 7.44 pm)

Any queries regarding these minutes, please contact:
Chris Williams, Democratic Governance Adviser
Tel: 01253 477153
E-mail: chris.williams@blackpool.gov.uk

Report to:	AUDIT COMMITTEE
Relevant Officers:	Philip Welsh, Head of Tourism and Communications
Date of Meeting	17 January 2019

EVENTS RISK MANAGEMENT AUDIT FOLLOW-UP

1.0 Purpose of the report:

- 1.1 To consider a progress report on the recommendations made in the internal audit report of events risk management issued on 28 March 2018.

2.0 Recommendation(s):

- 2.1 To consider the actions being implemented to address the audit recommendations relating to events risk management.

3.0 Reasons for recommendation(s):

- 3.1 To enable Audit Committee to consider an update and progress report on the audit recommendations.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

3.4 None.

4.0 Council Priority:

4.1 The relevant Council priority is organisational resilience.

5.0 Background Information

5.1 At its meeting in June 2018, the Audit Committee agreed to invite Heads of Service to the meeting to provide an update in relation to internal audit recommendation implementation.

The report being considered at this meeting relates to events risk management with the scope and assurance statement as follows:

Scope

The scope of the audit was to review whether arrangements for events risk management are robust and timely, including the adequacy of the approach to working with external event organisers and contractors to ensure that risks are appropriately managed.

Overall Opinion and Assurance Statement

A number of areas of good practice have been identified in relation to attracting and arranging popular events in Blackpool and the operation of the Safety Advisory Group. There has been rapid growth in the number and diversity of outdoor events and there are opportunities for events risk management processes to evolve in line with this.

There are a number of areas where improvements can be made to develop formal, effective event risk management arrangements. Therefore, it is considered that the controls in place in relation to events risk management arrangements are currently inadequate and action is required to ensure the production and receipt of timely and robust event planning information, whilst it is acknowledged that events are considered safe by the time that they take place.

5.2 Does the information submitted include any exempt information? No

5.3 **List of Appendices:**

Appendix 3(a): Internal Audit Recommendations and Agreed Actions.

6.0 **Legal considerations:**

6.1 Risks need to be effectively managed in order to comply with relevant legislation.

7.0 **Human Resources considerations:**

7.1 The controls being implemented will be undertaken by current employees.

8.0 **Equalities considerations:**

8.1 None,

9.0 **Financial considerations:**

9.1 The controls being implemented will be done so within current budget constraints.

10.0 **Risk management considerations:**

10.1 To enable the Audit Committee to gain assurance that risks are being effectively managed.

11.0 Internal/ External Consultation undertaken:

11.1 The progress report has been prepared in conjunction with the relevant Heads of Service and Chief Officers.

12.0 Background papers:

12.1 None.

Appendix 3(a) - Agreed Action Plan

	<i>Recommendation</i>	<i>Priority</i>	<i>Agreed Action</i>	<i>Responsible officer</i>	<i>Target Date</i>	<i>Progress</i>		
Page 10	R1		Refreshed terms of reference should be formally reported to and approved by the Safety Advisory Group.	2	Agreed. Linkage to the Places Directorate Risk Management Group through the Events Manager attending.	Events Manager	30 th April 2018	This has now been implemented.
	R2		A detailed action plan to implement the structured debrief recommendations should be developed and agreed with partners and progress against the agreed action plan should be regularly monitored through the SAG.	1	Agreed. Some areas have been implemented. To be taken to the Safety Advisory Group for discussion.	Emergency Planning Manager	31 st May 2018	This has been implemented using the police structured debrief template as a model. This was successfully trialled at the Livewire Festival event in 2017.

<i>Recommendation</i>		<i>Priority</i>	<i>Agreed Action</i>	<i>Responsible officer</i>	<i>Target Date</i>	<i>Progress</i>
R3	Consideration should be given to what further action could be taken to ensure that event organisers supply the required events documentation in a timely manner.	1	<p>Agreed. Will contact in writing all event organisers with details of deadlines for submitting documentation.</p> <p>Will write to event organisers three months before events requesting documentation a minimum of two months before events.</p>	Events Manager	Ongoing	Implemented – all event organisers are advised of the need to provide paperwork in good time. As a result, the compliance has improved dramatically and we continue to work with event organisers who fall short of this requirement.
R4	The process for Highways involvement in event planning processes should be reviewed to determine whether earlier involvement in the processes can be achieved where this is applicable.	2	<p>Linked to recommendation three.</p> <p>Highways already sit on the Safety Advisory Group and therefore are party to event discussions.</p>	Events Manager	Ongoing	Implemented – highways attend all Safety Advisory Group meetings.

<i>Recommendation</i>		<i>Priority</i>	<i>Agreed Action</i>	<i>Responsible officer</i>	<i>Target Date</i>	<i>Progress</i>
R5	The approach to verifying events insurance cover details and assuring that they are adequate should be clarified and insurance details obtained in a timely manner.	2	Events Manager to ask for insurance cover details and Risk and Resilience Officer to check details via Safety Advisory Group as required. Linked to recommendation 3, insurance cover reminders to be included.	Events Manager	Ongoing	Implemented. Again, all organisers are advised of the importance of this requirement and insurance details now appear in documentation.
R6	The timing of meetings between the Police, event organisers and the Events Team should be reviewed as to whether meetings earlier in the event planning process are feasible.	3	Agreed. Pre-meeting before Safety Advisory Group meeting to be held where applicable.	Events Manager	As required	As per R3 organisers are advised of the importance of timings and separate meetings are arranged with police where necessary.

<i>Recommendation</i>		<i>Priority</i>	<i>Agreed Action</i>	<i>Responsible officer</i>	<i>Target Date</i>	<i>Progress</i>
R7	The on line event notification process on the Council website should be reviewed to determine whether a robust on line process can be cost effectively implemented.	2	Agreed.	Events Manager	31 st December 2018	Implemented. All paperwork is available online
R8	The development with key partners of a standard procedure setting out what is required for events held on the Tower Headland site should be considered in order to assist with managing risks on the site.	2	Agreed. Linked to recommendation 2.			Implemented. Agreed template for use of Tower Festival Headland in a secured format is in place.
R9	The events management procedures should be formally documented to assist with sharing understanding in the approach to managing event risks and for use, for example, in the absence of the Events Manager.	2	Agreed.	Events Manager	31 st December 2018	Implemented. Documents in place.
R10	A clear policy should be determined on the use of licence agreements in order to protect the Council's interests in relation to events held on Council land.	2	Agreed. Criteria to be developed.	Events Manager	31 st December 2018	Not yet completed. This recommendation requires a Corporate decision.

<i>Recommendation</i>		<i>Priority</i>	<i>Agreed Action</i>	<i>Responsible officer</i>	<i>Target Date</i>	<i>Progress</i>
R11	Any specific further training requirements for events risk management should be considered and appropriate training provision identified.	2	<p>Agreed.</p> <p>A gap analysis to be undertaken and a suite of relevant courses to be identified and cascaded to managers as appropriate.</p> <p>Records of training undertaken to be maintained by the IPA process.</p>	Director of Communication and Regeneration / Emergency Planning Manager	30th June 2018	Implemented.
R12	A protocol should be developed and agreed with key partners setting out the process to be followed when it is considered that an event is at risk of becoming unsafe.	1	<p>Agreed.</p> <p>To discuss at the Safety Advisory Group to see if any improvement can be made to the protocol.</p>	Director of Communication and Regeneration	30th April 2018	Implemented.

<i>Recommendation</i>		<i>Priority</i>	<i>Agreed Action</i>	<i>Responsible officer</i>	<i>Target Date</i>	<i>Progress</i>
R13	The approach across the Council to and capacity for event site visits should be identified including whether an event site sign off process should be considered.	2	Agreed.	Events Manager	30th June 2018	See R10.
R14	Event sign off processes across the Council should be reviewed to ensure a consistency in standards in order to provide assurance to the Council on the management of event risks.	2	Agreed. Events calendar to be provided to Safety Advisory Group.	Events Manager	31st May 2018	See R10.
R15	Additional mechanisms for capturing post event feedback should be considered.	3	On line post events feedback form to be considered.	Events Manager	31st December 2018	Implemented.

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Report to:	AUDIT COMMITTEE
Relevant Officer:	Mark Towers, Director of Governance and Partnerships
Date of Meeting:	17 January 2019

ANNUAL GOVERNANCE STATEMENT 2017/2018 HALF-YEAR REVIEW

1.0 Purpose of the report:

1.1 The purpose of this report is to provide Audit Committee with an update on progress made on the actions identified in the Annual Governance Statement 2017/2018.

2.0 Recommendation(s):

2.1 To consider the Annual Governance Statement for 2017/2018.

3.0 Reasons for recommendation(s):

3.1 The Accounts and Audit Regulations (2015) require the Council to conduct a review on the effectiveness of its system of internal control and publish an Annual Governance Statement reporting on the review with the Statement of Accounts. Best practice states that this should be a continual process throughout the year and not just undertaken as an annual exercise.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

3.4 None.

4.0 Council priority:

4.1 The Annual Governance Statement is relevant to all Council priorities.

5.0 Background Information

5.1 Blackpool Council is responsible for ensuring that its business is conducted in accordance with the law and proper standards. It needs to ensure that public money is safeguarded, properly accounted for and used economically, efficiently and effectively.

The CIPFA Delivering Good Governance publication (2016) defines the various principles of good governance in the public sector and how they relate to each other and are defined as:

- Behaving with integrity, demonstrating strong commitment to ethical values and respecting the rule of law.
- Ensuring openness and comprehensive stakeholder engagement.
- Defining outcomes in terms of sustainable economic, social and environmental benefits.
- Determining the interventions necessary to optimise the achievement of the intended outcomes.
- Developing the Council's capacity, including its leadership and the individuals within it.
- Managing risks and performance through robust internal control and strong public financial management.
- Implementing good practices in transparency, reporting and audit, to deliver effective accountability.

The governance framework at Blackpool Council comprises the systems and processes, culture and values which the Council has adopted in order to deliver on the above principles. The system of internal control is a significant part of the framework and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies and objectives and can therefore only provide reasonable and not absolute assurance of effectiveness.

This report provides an update in terms of the progress which has been made in implementing the actions identified in the Annual Governance Statement.

5.2 Does the information submitted include any exempt information? No

5.3 List of Appendices:

Appendix 4(a)– Annual Governance Statement 2017-18 Half-Year Review

6.0 Legal considerations:

6.1 The Accounts and Audit Regulations (2015) require the Council to conduct a review, at least once a year, on the effectiveness of its system of internal control and include an Annual Governance Statement reporting on the review with the Statement of Accounts.

7.0 Human Resources considerations:

7.1 None.

8.0 Equalities considerations:

8.1 None.

9.0 Financial considerations:

9.1 Each of the actions identified in the Annual Governance Statement will be delivered within the constraints of the agreed budget for 2018/19.

10.0 Risk management considerations:

10.1 Risk management and the control environment have been considered throughout the draft of the Annual Governance Statement.

11.0 Ethical considerations:

11.1 None.

12.0 Internal/ External Consultation undertaken:

12.1 In October 2016 a Good Governance Group was formed at the Council. One of the roles of the group will be to prepare the Annual Governance Statement and oversee the delivery of the identified actions.

The Good Governance Group comprises of:

- Director of Governance and Partnerships
- Head of Audit and Risk
- Chief Accountant
- Head of ICT

- Transformation Manager
- Head of Democratic Governance
- Strategic Equality and Diversity Manager
- Head of HR and Organisational Development
- Deputy Head of Legal Services

13.0 Background papers:

13.1 None.

Appendix 4(a) - Annual Governance Statement 2017-18 Half-Year Review

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
<p>Code of Conduct and Behaviours</p>	<p>Raise awareness of the whistleblowing policy to officers and elected members through communication and training.</p>	<p>Director of Governance and Partnerships</p>	<p>Before mid-term review</p>	<p>Partially Implemented:</p> <p>Awareness of the policy has been raised with elected members and training is being scheduled as part of the Members Induction programme.</p>
	<p>Review the guidance available for elected members relating to conflict management / intimidation in public office and communicate the support packages available such as training and access to the Employee Assistant Programme.</p>	<p>Director of Governance and Partnerships</p>	<p>After mid-term review</p>	<p>Partially Implemented:</p> <p>A programme of training on registration of interests for all councillors has been held (39 of 42 councillors attended), with updated forms and guidance documents issued.</p> <p>The Employee Assistance Programme has been promoted with members of the Council (through emails and notices in group rooms).</p> <p>The Government response to the consultation on intimidation in office (from the Committee on Standards in Public Life) is currently being awaited.</p> <p>Members have been made aware of the option to use a political party address for their contact details on the Council website.</p>

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
Commitment to Openness, Communication and Consultation	Continue to improve how the Council communicates through the implementation of the recommendations identified in the LGA Peer Review.	Director of Communications and Regeneration	Before mid-term review	<p>Partially Implemented:</p> <p>The team are continuing to improve how the Council communicates through the implementation of the recommendations in the LGA Peer Review.</p> <p>They are also looking at how the team is structured and taking opportunities to recruit to the team where possible.</p> <p>The team are working to the team's strengths and drawing on best practise from across the country.</p>
	Continue to deliver the channel shift agenda to improve accessibility to residents and reduce demand on Council resources.	Director of Resources	After mid-term review	<p>Partially Implemented:</p> <p>The Channel Shift group continue to deliver online projects for the benefit of residents and to assist with demand on Council Services. Projects delivered since the last report include further changes to the bulky matters online process, residential bin changes, street cleansing reporting, environmental protection complaint reporting, tip permits and alley gate key ordering.</p> <p>Further work has been carried on improving the Council website and the</p>

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
				<p>rollout of mobile working for Social Workers and Visiting Officers has been completed.</p> <p>A number of other services are now available online including electronic landlord payment schedules and self-service modules for both Revenues and Benefits.</p> <p>Several telephony reviews have been undertaken to allow services to manage demand in a more proactive way whilst also encouraging channel shift, leading to a better customer experience when contacting the Council.</p>
	Continue to improve the level of information published on the Council website so that this is readily available.	Director of Governance and Partnerships	After mid-term review	<p>Implemented:</p> <p>The Council's website has continued to develop through the provision of content and services. The number of unique users rose from 1,162,578 in 16/17 to 1,425,988 in 17/18.</p>
	Undertake a resident's survey to assess how they perceive the Council and use the outcome to inform the future direction of the Council.	Director of Strategy (Assistant Chief Executive)	Before mid-term review	<p>Implemented:</p> <p>The resident's survey has concluded and been reported to CLT, with a clear majority of indicators showing positive change. The survey will now be</p>

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
				undertaken annually to track change and further inform budget and strategic planning.
	Develop and roll out a toolkit to services in relation to good practice when undertaking consultation exercises.	Director of Public Health	Before mid-term review	Not Implemented: Development of the toolkit was put on hold pending the outcome of an internal audit of community engagement audit.
Developing, Communicating and Translating the Vision	Develop a communications plan ready for translating the Council Plan into information which is accessible and interesting to different audiences.	Director of Communications and Regeneration	After mid-term review	Partially Implemented: The revised Council Plan is set for approval by February 2019. Plans are in place for internal and external communication of the Council Plan.
Performance Management	Embed a new performance management framework with outcome based indicators across the Council.	Director of Strategy (Assistant Chief Executive)	Before mid-term review	Implemented: New Performance Framework, data-gathering and reporting mechanisms are in place.
Roles and Responsibilities	Update the organisational charts to accurately reflect the Senior Leadership Teams roles and responsibilities to assist elected members identify who to contact to seek advice.	Director of Governance and Partnerships	Before mid-term review	Implemented: These have now been done and elected members have access to them.

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
Compliance with Relevant Laws, Regulations, Internal Policies and Procedures	Ensure that the Council complies, as far as reasonably possible, with the requirements of the General Data Protection Regulations.	Director of Governance and Partnerships	Before mid-term review	Partially Implemented: Training has been undertaken with elected members and senior managers on a face to face basis. An iPool course has been written and has been sent out to all employees. Currently 70% of employees who have access to iPool have completed the training and focus groups have been arranged to roll-out training to staff who are not computer based.
	Increase monitoring of the Policy and Strategy Framework to ensure that key documents are refreshed on a timely basis.	Director of Governance and Partnerships	Before mid-term review	Implemented: A report on the monitoring of the Policy and Strategy framework is considered by the Council's Corporate Leadership Team once a month. This identifies forthcoming strategies and those to be reviewed along with key deadlines and actions for officers.

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
	Assess how to strengthen contract management arrangements across the Council.	Director of Resources	After mid-term review	<p>Partially Implemented:</p> <p>Contract management is not purely a procurement responsibility it sits with Heads of Service and budget holders except for corporate contracts which sits with the Head of Procurement and Projects.</p> <p>A contract management guide already exists to advise responsible officers of the simple steps to do contract management well.</p> <p>In addition the Procurement Team is about to launch a new iPool course on contract management. The Good Governance Group will consider recommending that the iPool course is mandatory for all officers with contract management responsibilities.</p> <p>The Procurement and Development Team is looking at contract management functionality available on our e-tendering software, but at the moment it would not resolve the simple issue that responsible officers need to make time to do simple contract management tasks well.</p>

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
Risk Management	Undertake an independent review of all service level risk registers to improve the quality of the information contained in the risk registers.	Director of Resources	After mid-term review	<p>Partially Implemented:</p> <p>Risk Workshops have been held across the Resources, Governance and Partnerships, Chief Executives and Community and Environmental Services Directorates and service level risk registers updated.</p> <p>Plans are in place to ensure that all other directorates go through this review process before the end of the financial year.</p>
	Embed and ensure buy in to the Risk Management Framework 2018/21 across the Council focusing not only of the threats which risks can create but the opportunities that they bring for innovation and transformation.	Director of Resources	After mid-term review	<p>Partially Implemented:</p> <p>The Risk Management Framework has been rolled out across the Council. An internal audit is currently underway to assess how well this is embedding across the Council.</p>
	Enhance how strategic risks are reported to the Audit Committee to enable effective review and challenge and demonstrate to correlation between the strategic risk register and Council strategies and plans.	Director of Resources	Before mid-term review	<p>Implemented:</p> <p>A revised approach of reporting progress against the Strategic Risk Register to Corporate Leadership Team and Audit Committee has been implemented.</p>

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
Scrutiny Arrangements	Deliver the actions arising from the review of the scrutiny function by North West Employers.	Director of Governance and Partnerships	After mid-term review	<p>Partially Implemented:</p> <p>A development review of scrutiny was undertaken in conjunction with North West Employers during 2018 and a full feedback event on the report was held with key members and officers in September 2018.</p> <p>A working group has been established to consider the review and recommended actions on a range of areas – feedback will be in January 2019 with a report to Council later that month on some key principles.</p>
Learning and Developing	Review methods of training available for elected members through the Member Training Panel and consider the wider use of e-learning, webinars and involvement in training sessions being held for officers.	Director of Governance and Partnerships	After mid-term review	<p>Partially Implemented:</p> <p>Webinars are currently being developed ahead of the Members Induction 2019 – initially to include introductory briefings to Chief Officers and work of their departments.</p> <p>An online module for registration of interests for members is currently being developed through the iPool facility.</p> <p>Further external web tools will be promoted as part of the member’s</p>

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
				induction programme, e.g. by the Local Government Association.
	Increase the robustness of succession plans across the Council.	Chief Executive	Before mid-term review	<p>Partially implemented:</p> <p>The second Leadership survey is now complete and a Leadership Development programme will follow. Succession planning will be embedded within the appraisal process from April 2019.</p>
	Deliver a Leadership Development Programme based on the outcome of the Leadership Survey.	Chief Executive	After mid-term review	<p>Partially implemented:</p> <p>The second Leadership survey is now complete and Chief Officers have been provided with the overall Council results and results and comments from their own Directorates. A Leadership Development programme will be put in place following discussions and outputs from each DMT.</p>
	Continue to develop digital skills across the Council to assist in the use of innovative technology solutions to build capacity through the further roll out of	Director of Resources	After mid-term review	<p>Partially implemented:</p> <p>The rollout of Windows 10 is at 50% and approximately 600 employees have received training on how to work smarter using Office 365.</p>

Issue	Actions	Responsible Officer	Target Date	Mid-Term Progress
	new devices and Microsoft 365 and training around cyber skills.			New Cyber Security training has been launched.
Partnership and Joint Working	Consider how elected members can network with other public sector partners at neighbourhood level.	Director of Public Health	After mid-term review	<p>Partially Implemented:</p> <p>Community engagement training is being developed for elected members and will be delivered as part of the induction programme.</p> <p>It will also be a recommended as part of best practice that elected members are notified of any engagement within their areas.</p>
	A Framework for the implementation of shared services and partnership / joint working arrangements will be developed.	Director of Governance and Partnerships	After mid-term review	<p>Implemented:</p> <p>A SharePoint site has now been created to as a repository for working arrangements and a framework agreed by the Council's Corporate Leadership Team.</p>

Report to:	AUDIT COMMITTEE
Relevant Officer:	Tony Doyle, Head of ICT Services
Date of Meeting	17 January 2019

COUNCIL SAFEGUARDS AGAINST CYBER RISKS

1.0 Purpose of the report:

1.1 To provide Audit Committee with an annual update in relation to the actions the Council is taking to reduce cyber risks. To update on the emerging threat landscape the Council faces in relation to cyber-attacks.

2.0 Recommendation(s):

2.1 To note the update on how the Council safeguards against cyber risks.

3.0 Reasons for recommendation(s):

3.1 The Audit Committee requested further information about the actions which the Council is taking to reduce the risk of a cyber-attack.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

3.4 None.

4.0 Council Priority:

4.1 The report relates to all of the Councils priorities.

5.0 Background Information

5.1 Recent threats

The ICT Service and the Council's network partner The Networking People (TNP)

continue to spend an increasing proportion of time defending and protecting the Council’s Network from Cyber-attack. During the last 12 months the ICT service have managed and contained a Distributed Denial of Service Attack (DDos Attack) on the Council’s website with attack traffic coming from across the globe as well as mitigated daily thousands of malicious emails that attempt to infect or steal data from the Council’s network. The service has seen increasing evidence of cleverly crafted and personally profiled spear phishing emails that even the most savvy end user would be tempted to click on. There is no doubt the cyber threat is growing and in spite of continuing investment and commitment of time and resources, the threats will continue to challenge the Council in the future.

Type of attack	Number of attacks over a 12 month Period
Malware blocked from websites visited and emails attachments	15,460
Ransomware blocked	2,256
Attacks blocked on Council websites	21,164,974

LGA Cyber Stocktake

In August 2018 the Council participated in a cyber-stocktake organised by the Local Government Association (LGA). The LGA cyber stocktake was devised in conjunction with Rand Europe and SOCITM. The Council received an overall rating of Green/Amber, which puts the Council in the upper quartile of the stocktake. 100% of all Local Authorities participated in the Stocktake.

The stocktake has also provided a focus for areas that can be improved which included the overall cyber awareness of employees and Elected Members and testing of employees’ susceptibility to cyber-attack.

New ICT Security Policy, Mandatory Cyber Security Training and internal phishing test

In December 2018 an updated ICT Security policy was launched which coincided with the introduction of the new mandatory cyber skills training. A deadline has been set for all employees to complete the training by 31 January 2019. As of 4 January 2019, 781 employees have completed the training.

Also in December 2018, for the first time, the ICT service ran an internal phishing test to ascertain how susceptible employees were to clicking on phishing emails. The service is pleased to report that less than one percent of employees were fooled into

clicking on the email. However, there is no room for complacency here given the increasing levels of sophistication the email scammers are using.

Public Services Network (PSN) Code of Connection

After a significant amount of effort by the team through the Summer and Autumn of 2018, in December 2018 the Council received a new PSN Compliance certificate after an assessment of its security infrastructure by an external PSN assessor. This provides assurance that the Council's infrastructure is sufficiently secure to interconnect with other Government networks and public sector infrastructures. The Council understands since the Wannacry cyber-attack on the NHS, PSN assessments have become more stringent and a significant number of local authorities including some of the bigger authorities are struggling to achieve compliance.

GDPR (General Data Protection Regulations)

In May 2018 the new General Data Protection Regulations came into force. The regulation requires the Council to have appropriate technical and organisation measures in place as a security principle. Consequently, the Council's ICT service has developed some new security processes to further safeguard data, these have included increasing password length and complexity as well carrying out a security infrastructure due diligence process for all new software systems as part of Data Privacy Impact Assessment (DPIA). This has become particularly important for data being hosted outside of the Council network in third party clouds. It has become apparent that some suppliers in the software marketplace struggle to meet equivalent requirements to the Council's PSN compliance.

Threat Intelligence

The ICT Service continues to attend the North West WARP(Warning Advice and Reporting Point) and Society of Information Technology Management (SOCITM) in which intelligence about cyber threats is regularly shared within the Local Government Community and where external experts such as from the National Cyber Security Centre (NCSC) part of GCHQ share their expertise. In addition, the ICT Service subscribes to a number electronic intelligence sharing services, which quickly advise on new security vulnerabilities and attacks.

National Cyber Security Centre (NCSC) Active Cyber Defence Protective Services

NCSC have also introduced some protective services and standards which the Council has subscribed to. These include a protective Domain Name System (DNS) Service, a web checker service for quickly identifying vulnerabilities on Council websites and a Mail Check standard for reducing the risk of fraudulent emails.

Future Threats

Email Scams increasing in sophistication

The ICT service are having some success in reducing the volume of spam emails targeting the Council. However, the emerging trend is the increasing level of sophistication of personally targeted Cyber Scams. The Council can no longer assume that every phishing email will be easy to spot by an employee. The number of targeted attacks is increasing in which employees social media profiles and job roles have been carefully studied and this information alongside the use of professional branding and logos is being used as part of a scam.

The adoption of Cloud based systems

The ICT service are increasingly seeing software suppliers encouraging Council services to move their software systems to Cloud based hosted systems. The more distributed the Council data becomes the more challenging it is to holistically manage the security. The recently implemented Data Privacy Impact Assessment (DPIA) process which incorporates a security due diligence process is helping to minimize and manage these risks. It is essential that Council data is only hosted in a third party cloud when we are satisfied the risks have been assessed and understood and a formal legal contract has been put in place to ensure there is adequate data protection.

The digital transformation of cyber crime

Whilst the Council continues to progress with its own digital transformation many of the new technologies we seek to exploit, are also being cleverly exploited by cyber criminals. Attacks using machine learning, agile development, automation and encryption are widely being used by Cyber criminals to transform their own levels of sophistication. It is essential that we continue to invest and develop the Council's cyber defense capabilities to provide adequate assurance in this area.

5.2 Does the information submitted include any exempt information? No

6.0 Legal considerations:

6.1 A cyber-attack could result in a Data Protection breach which could result in a significant fine for the Council. From May 2018 the new General Data Protection Regulation (GDPR) comes in the force with fines up to 4% of turnover or 20 million euros

7.0 Human Resources considerations:

7.1 The completion of the ICT Security and Data Protection i-pool courses are mandatory for all Council employees.

8.0 Equalities considerations:

8.1 None.

9.0 Financial considerations:

9.1 The implementation of effective controls to reduce the risk of a cyber-attack need to be managed within the constraints of the available budget.

10.0 Risk management considerations:

10.1 Dealing with cyber risks is a key priority of the Council and is identified as one of the strategic risks which need to be managed.

11.0 Ethical considerations:

11.1 None.

12.0 Internal/ External Consultation undertaken:

12.1 None.

13.0 Background papers:

13.1 None.

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Report to:	AUDIT COMMITTEE
Relevant Officers:	John Blackledge, Director of Community and Environmental Services Karen Smith, Director of Adult Services Steve Thompson, Director of Resources
Date of Meeting	17 January 2019

STRATEGIC RISK REGISTER – SERVICE FAILURE

1.0 Purpose of the report:

- 1.1 To consider a progress report on individual risks identified in the Council's Strategic Risk Register related to service failure.

2.0 Recommendation(s):

- 2.1 To consider the controls being implemented to manage the strategic risk relating to service failure.

3.0 Reasons for recommendation(s):

- 3.1 To enable the Audit Committee to consider an update and progress report in relation to an individual risk identified on the Strategic Risk Register.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

3.4 None.

4.0 Council Priority:

4.1 The relevant Council priority is organisational resilience.

5.0 Background Information

5.1 At its meeting in March 2018, the Audit Committee agreed to continue to invite Strategic Risk Owners to attend future meetings to provide updates and progress reports in relation to the individual risks identified on the Strategic Risk Register.

Does the information submitted include any exempt information?

No

5.2 List of Appendices:

Appendix 6(a): Strategic Risk Register Progress Report –Service Failure.

6.0 Legal considerations:

6.1 Risks need to be effectively managed in order to comply with relevant legislation.

7.0 Human Resources considerations:

7.1 The controls being implemented will be undertaken by current employees.

8.0 Equalities considerations:

8.1 None.

9.0 Financial considerations:

9.1 The controls being implemented will be done so within current budget constraints.

10.0 Risk management considerations:

10.1 To enable Audit Committee to gain assurance that strategic risks are being effectively managed.

11.0 Internal/ External Consultation undertaken:

11.1 The progress report has been prepared in conjunction with risk managers and risk owners.

12.0 Background papers:

12.1 None.

Strategic Risk Register Progress Report

Strategic Risk: Service Failure

No	Risk	Sub No.	Sub-Risk	% Overall Weighting	Impact / Consequences	Opportunity	Gross Risk Score			Controls and Mitigation			Nett Risk Score			New / Developing Controls	Risk Manager	CLT Risk Owner	Target Date	Corporate Priority
							I	L	GS	I	L	NS								
1	Service Failure	1a	Failure of a service provider in high risk contracted areas such as social care and waste management.	30%	Increased costs.	Robust service provision.	5	4	20	Procurement procedures in place which cover business continuity arrangements.	4	3	12	Bring the domestic waste service under the umbrella of the Council.	Project Manager	Director of Community and Environmental Services	March 2019	Organisational Resilience		
					Reputational damage to the Council.									Oversight of the market, high level contingency planning and staff experienced in dealing with service failure.					Regular prioritisation of team workload including the use of individual work plans in supervision and regular team meetings to ensure effective in depth monitoring for regulated and non regulated care.	
	1b	Loss of key infrastructure and resource which results in Council services not being delivered.	30%	Inability to deliver critical services.	Build a resilient organisation.	5	5	25	Business continuity programme in place which links to the Council's Major Emergency Plan. Corporate business continuity plan in place supported by a critical activity list. Corporate ICT and Property business continuity guidance in place.	5	3	15	Look for provisions for data centre refresh in the coming years to continue to provide resilience.	Head of ICT Services	Director of Resources	March 2022	Organisational Resilience			
				Deterioration of the property portfolio beyond economic repair.									Annual review of planned maintenance undertaken and agreed with the Corporate Asset Management Group.							
	1c	Cyber Threats	40%	Fraud.	Improve knowledge and awareness across departments on identifying phishing emails. Report anything that is opened. Participate in training and knowledge gathering opportunities. Loss of compliance. Monetary penalties / fines.	5	5	25	Investing in Sandbox technology. Investigating in SEIM (Security Information Event Management) to proactively monitor activity on the network. Increase cyber defences and use blacklist / reputation to authenticate email.	5	4	20	Continue to develop and refine technologies to provide proactive altering and monitoring of the changing threats.	Head of ICT Services	Director of Resources	March 2019	Organisational Resilience			
				Reputational damage.									Review use of white listing to mitigate risk of being hijacked and introduce SPF (Sender Policy Framework) to check against spoofing.							
				Loss of compliance.									Review of ICT Security ipool course and roll-out across the Council.							
				Monetary penalties / fines.																
	Overall Nett Risk Score											16.1								

Strategic Risk Register Progress Report

Sub-Risk: Failure of a service provider in high risk contracted areas such as social care and waste management (weighting 30%)		Gross Risk Score	Nett Risk Score
		20	12
<i>Risk Score in 2017/18</i>		20	16
Risk Owner: Director of Community & Environmental Services / Director of Adult Services			
Existing Controls in Place:			
<ul style="list-style-type: none"> • Procurement procedures in place which cover business continuity arrangements. • Oversight of the market, high level contingency planning and staff experienced in dealing with service failure. 			
Progress on new controls:			
Control	Risk Manager	Current Position	Outcomes / Results
Bring the domestic waste service under the umbrella of the Council. (Target Date: March 2019)	Project Manager	<ul style="list-style-type: none"> • LATCO registered with Companies House. • Project Board / Working Group established to ensure all aspects of transition / insourcing are organised prior to transfer on 01/07/19. • Tenders completed for Layton CVMU works, acquisition of new RCV vehicles, and supply of ICT software. • TUPE arrangements for staff will commence in March 2019. • Insurance requirements being progressed. 	<ul style="list-style-type: none"> • LATCO to operate Domestic Refuse Collection services with effect from 1st July 2019.
Regular prioritisation of team workload including the use of individual work plans in supervision and regular team meetings to ensure effective in depth monitoring for regulated and non-regulated care. (Target Date: March 2019)	Head of Integrated Commissioning	<ul style="list-style-type: none"> • Regular prioritisation of team workload including the use of individual work plans in supervision, and regular team meetings to ensure effective in depth monitoring for regulated and non-regulated care. • Regular meetings with regional CQC representatives to discuss known risks and issues and share relevant information. 	<ul style="list-style-type: none"> • Effective in depth monitoring for regulated and non-regulated care.

Strategic Risk Register Progress Report

		<ul style="list-style-type: none"> Engagement in RADAR (regional risk information sharing process). Regular dialogue with providers through forums and quality monitoring visits. Contingency plans supported by In House provider services. 	
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Sub-Risk: Loss of key infrastructure and resource which results in Council services not being delivered (weighting 30%)	Gross Risk Score	Nett Risk Score	
	25	15	
	<i>Risk Score in 2017/18</i>	12	
Risk Owner: Director of Resources			
Existing Controls in Place:			
<ul style="list-style-type: none"> Business continuity programme in place which links to the Council's Major Emergency Plan. Corporate business continuity plan in place supported by a critical activity list. Corporate ICT and Property business continuity guidance in place. 			
Progress on new controls:			
Control	Risk Manager	Current Position	Outcomes / Results
Look for provisions for data centre refresh in the coming years to continue to provide resilience. (Target Date: March 2022)	Head of ICT Services	<ul style="list-style-type: none"> Engaged with Microsoft to investigate the feasibility of migrating the data centre infrastructure into the cloud. 	<ul style="list-style-type: none"> Improved understanding of alternative options for a data centre refresh.
Annual review of planned maintenance undertaken and agreed with the Corporate Asset Management Group. (Target Date: March 2019)	Head of Property Services	<ul style="list-style-type: none"> Prioritisation of backlog maintenance against the critical repairs and maintenance budget undertaken annually. A separate review of leisure sites, prioritising back of house and front of house urgent repairs has been carried out, 	<ul style="list-style-type: none"> Urgent repairs are carried out to ensure sites are safe and appropriately maintained.

Strategic Risk Register Progress Report

		<p>as agreed by the Corporate Asset Management Group.</p> <ul style="list-style-type: none"> £500k has been allocated with potential additional funding from Adults capital programme. 	
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Sub-Risk: Cyber Threats (weighting 40%)		Gross Risk Score	Nett Risk Score
		25	20
		<i>Risk Score in 2017/18</i>	20
Risk Owner: Director of Resources			
Existing Controls in Place:			
<ul style="list-style-type: none"> Investing in Sandbox technology. Investigating in SIEM (Security Information Event Management) to proactively monitor activity on the network. Increase cyber defences and use blacklist / reputation to authenticate email. 			
Progress on new controls:			
Control	Risk Manager	Current Position	Outcomes / Results
Continue to develop and refine technologies to provide proactive altering and monitoring of the changing threats. (Target Date: March 2019)	Head of ICT Services	<ul style="list-style-type: none"> A network alerting tool has been implemented which sends proactive alerts in relation to unusual activity on the network. ICT are working on a SIEM (Security Incident and Event Monitoring) implementation with TNP. This is at proof of concept stage. 	<ul style="list-style-type: none"> Proactive alerts in place in relation to unusual activity on the network.
Review use of white listing to mitigate risk of being hijacked and introduce SPF (Sender Policy Framework) to check against spoofing.	Head of ICT Services	<ul style="list-style-type: none"> Action complete. White listing is regularly reviewed. SPF (Sender Policy Framework) is in place. In response to National Cyber Security Centre (NCSC) guidance, ICT have also implemented DKIM (Domain Keys Identified 	<ul style="list-style-type: none"> Cyber risk from email actively managed.

Strategic Risk Register Progress Report

(Target Date: March 2019)		Mail), an email authentication protocol, and DMARC (Domain-based Message Authentication, Reporting & Conformance), which protects against email impersonation / spoofing.	
Review of ICT Security iPool course and roll out across the Council. (Target Date: March 2019)	Head of ICT Services	<ul style="list-style-type: none"> The ICT / Cyber Security iPool course has been fully reviewed, alongside an updated Information and ICT Acceptable Use Policy. This new mandatory iPool course was rolled out to users with Blackpool Council email accounts in early December with a target completion date of 31 January 2019. As at 18/12/2018, 554 users have completed the course. 	<ul style="list-style-type: none"> Staff have increased awareness of Cyber Security issues and how they can help to protect the Council from these risks.

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